

Application for PRE-K

School Year 2024 - 2025

New Student

(Student must be 4 years old by Sept. 1, 2024)



KIRK SCHOOL

~ Since 1961 ~

▶ STUDENT _____ Male Female Date of Birth _____

▶ PARENT/GUARDIAN 1 _____ SSN _____

Occupation _____ Employer _____

Home # (____) _____ Work # (____) _____ Cell # (____) _____

Email address _____

▶ PARENT/GUARDIAN 2 _____ SSN _____

Occupation _____ Employer _____

Home # (____) _____ Work # (____) _____ Cell # (____) _____

Email address _____

(The following two questions are required by the State of California-Department of Health, Immunization Branch)

Place of Birth _____

Race/Ethnicity White, not Hispanic Hispanic Black Other: _____

MAILING ADDRESS: Street _____

City _____ Zip Code _____

Please indicate if parents have different addresses

The school year will begin on Monday, August 19, 2024 and end Thursday, June 12, 2025

MONTHLY TUITION

3 DAYS 9:00AM - 1:00PM \$725 FULL DAY 7:00AM - 6:00PM \$925

4 DAYS 9:00AM - 1:00PM \$910 FULL DAY 7:00AM - 6:00PM \$1110

5 DAYS 9:00AM - 1:00PM \$1070 FULL DAY 7:00AM - 6:00PM \$1270

Extended hours are available on an as needed basis from 7:00am-9:00am and from 1:00pm-6:00pm at \$8.00 per hour

REGISTRATION & MATERIALS FEE: \$250.00 (non-refundable) - Includes Classroom consumables, cooking fee and yearbook.
DUE WITH APPLICATION

Parents assume responsibility for full payment of winter and spring breaks, and any other legal holidays.

Parent's Signature _____

Date: _____ ➔



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For New Students

In order for us to become acquainted with you and your child, we would appreciate if you would take a few moments to answer **ALL** of the questions as completely as possible.

1. How did you hear about Kirk School? _____

2. What other school(s) did you review? _____

3. What influenced your decision to apply to Kirk School? _____

4. Has your child ever been involved with a playgroup or preschool? _____ Name of school and date of attendance _____
Please describe the experience _____
5. Child's favorite activities, likes, dislikes, fears, etc. _____

6. What language is spoken at home? _____
7. Describe the general temperament of your child (outgoing, shy, etc.) _____

8. What are your child's food likes or dislikes? _____
9. Does your child have allergies? _____
10. Has your child had any health concerns, major illness or injuries? _____

11. Was your child premature? If yes, how many months _____
12. Are there any recent major family changes? _____
13. In what way can we help your child this year? _____

14. Is your child potty trained? _____
15. Please list the names and ages of the child's siblings _____

~THANK YOU FOR ENTRUSTING YOUR CHILD'S EDUCATIONAL JOURNEY TO KIRK~